FEC MAIL CENTER 2015 APR 13 AM 8: 49

Committee Name:	
Community Action Now	
If registered, FEC ID:	
Today's Date:	
April 6, 2015	·

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Treasurer's Name:

Fanny Lawren

Treasurer

Treasurer

FEC FORM 1

Use

Only

1503 141 1746

STATEMENT OF **ORGANIZATION**

FEC MAIL CENTER 2015 APR das AM 8: 49

(Revised 06/2012)

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5		
[C,0,M,M,U,N,1,T,Y,,1	A,C,T,1,0,N, N,0,W				
	_ 				
ADDRESS (number and street)	[8,5,0,8, QUEEN	15 BLVD, 12	1/Fl		
(Check if address is changed)			<u> </u>		
	ELMHURST		[N,Y] [1,1,3 STATE ▲	8,7,3]-[ZIP CODE▲	
COMMITTEE'S E-MAIL ADDRES	SS				
(Check if address is changed)	[C,O,M,M,U,N,1,T,Y,1	9, C, T, 1, 0, N, N, O, W, N	Y @ G MAIL.	COM	
	Optional Second E-Mail Addr	ess		t	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)				
(Check if address is changed)					
2. DATE 0 4 0 6 2015					
3. FEC IDENTIFICATION NUMBER ▶ C					
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasurer FANNY LAWREN					
Signature of Treasurer	20 miles		Date 0.4	2.0.1.5	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office		For further information (contact: FE	C FORM 1	

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

		LO 1 01	m 1 (Neviseu Ozizooo)		
5. TYPE OF COMMITTEE					
	Cano	didate	Committee:		
	(a) ·		This committee is a principal campaign committee. (Complete the candidate information below.)		
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)		
	Name Candi				
	Candi Party	date Affiliatio	Office State Sought: House Senate President District		
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate					
	Part	v Com	nmittee:		
	(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.		
	Polit	ical A	ction Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:		
			Corporation Corporation w/o Capital Stock Labor Organization		
			Membership Organization Trade Association Cooperative		
			In addition, this committee is a Lobbyist/Registrant PAC.		
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)		
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
	Joint	Fund	raising Representative:		
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.		
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.		
		Com	mittage Participating in Joint Fundroiser		
		Com	mittees Participating in Joint Fundraiser		
		1.	FEC ID number C		
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

V	Write or Type Committee Name	
-	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
L		
L		
	Mailing Address	
	·	CITY STATE ZIP CODE
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in possession of committee
	Full Name FANN	Y LAWREN .
		85,08, @UEENS, BLVD,, 21/FL
		ELMHURST NY [1373-
	Title or Position	CITY STATE ZIP CODE
		Telephone number 7,18 - 8,78 - 4,9,70
8.	Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name and address of sistant treasurer).
	Full Name of Treasurer	Y, LAWREN
	Mailing Address	8,5,0,8, QUEENS, BLVD, 21,FC
		ELMHURST NY 11373-
	Title or Position	CITY STATE ZIP CODE
		Telephone number 7,18-8,78-49,70

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

1503-141-1749

THE STOR WAY TO

TO: FEDERAL ELECTION COMMISSION

999 E STREET, N.W.

WASHINGTON, D.C. 20463

F.LAWREN 8508 QUEENS BLVD. 2FL ...ort N.Y. 11373

2015 APR 13 AM 8:

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of, Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office

Date of Receipt or Postmarked Other (Specify): DATE PREPARED (3/2015)